2007 Bi-Weekly Employee Rates

MEDICAL

Employee Contribution **CIGNA HealthCare** Employee Only \$10.49 \$318.10 Employee + one Employee + 2 or more \$437.85 **AvMed** Employee Only \$0.00 Employee + one \$163.23 Employee + 2 or more \$221.41 Humana **Employee Only** \$0.00 Employee + one \$182.21 Employee + 2 or more \$246.38 **JMH** Employee Only \$0.00 \$162.29 Employee + one Employee + 2 or more \$220.20 Vista Healthplan **Employee Only** \$0.00 Employee + one \$147.63 Employee + 2 or more \$199.61

DENTAL

	Employee Contribution	
	Standard	Enriched
Met Life		
Employee Only	\$0.00	\$4.68
Employee + one	\$14.82	\$24.07
Employee + 2 or more	\$33.16	\$48.09
American Dental Plan		
Employee Only	\$0.00	\$1.25
Employee + one	\$2.60	\$4.69
Employee + 2 or more	\$6.09	\$9.80
Oral Health Services		
Employee Only	\$0.00	\$1.25
Employee + one	\$2.60	\$4.69
Employee + 2 or more	\$6.09	\$9.80

Optix Vision	
Employee only	\$2.30
Employee + one dependent	\$4.60
Employee + two or more dependents	\$8.48

Please check your pay stub on January 5, 2007 to insure the correct deduction was taken. Contact your DPR no later than January 12, 2007 if there are any processing errors.

